

**STATE OF RHODE ISLAND**  
**BEFORE THE RHODE ISLAND ETHICS COMMISSION**

IN RE: \_\_\_\_\_  
Respondent

Complaint No. \_\_\_\_\_  
(For Office Use Only)

**COMPLAINT**

The undersigned Complainant(s) files this Complaint in the public interest and requests that the Rhode Island Ethics Commission conduct an investigation into certain conduct and activities of the above-named Respondent, for the purpose of determining whether said Respondent has violated the Rhode Island Code of Ethics.

To the best of my(our) information and belief, said Respondent has violated the Rhode Island Code of Ethics as follows:

1. Respondent is: (Please check one and fill in Respondent's title)

\_\_\_ a state or municipal elected official: \_\_\_\_\_

\_\_\_ a state or municipal appointed official: \_\_\_\_\_

\_\_\_ an employee of state or local government or of a board, commission or  
agency: \_\_\_\_\_

2. The Respondent's home or business address is (include telephone number if known):

Name \_\_\_\_\_ Tel. No. \_\_\_\_\_

Street \_\_\_\_\_ City and State: \_\_\_\_\_

(Set forth below in separately numbered paragraphs each specific  
act complained of including the time and place of its occurrence.)

3. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I (We) acknowledge that the facts above-stated are true and accurate to the best of my(our) knowledge.

DATE: \_\_\_\_\_

\_\_\_\_\_  
Signature of Complainant

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
( ) \_\_\_\_\_  
Telephone Number

State of Rhode Island

County of \_\_\_\_\_

Subscribed and sworn to by the above-signed at \_\_\_\_\_ before me this  
\_\_\_\_\_ day of \_\_\_\_\_ 19 .

\_\_\_\_\_  
NOTARY PUBLIC

My Commission Expires: \_\_\_\_\_  
(SEAL)